



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 2984

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

Florida Atlantic achieved a major milestone in its history as the university was designated as an R1 Very High Research Activity University, the nation's most prestigious research designation in higher education. To expand capacity and prepare for expanded pre-clinical and clinical studies, the university is seeking one-time investments to acquire specific scientific instruments, hire faculty with experience relevant to the proposed instruments and individuals who can support the expanded research infrastructure of the university and to continue clinical trials that have shown early positive indicators of tackling incurable neurological diseases.

5. **State Agency to receive requested funds**

**State Agency contacted?**  Yes

6. **Amount of the Nonrecurring Request for Fiscal Year 2025-2026**

Type of Funding	Amount
Operating	6,600,000
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>6,600,000</b>

7. **Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	6,600,000	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2025-2026</b>	<b>6,600,000</b>	<b>100%</b>

8. **Has this project previously received state funding?**  No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. **Is future-year funding likely to be requested?**  No

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**



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## Complete questions 10 and 11 for Fixed Capital Outlay Projects

### 10. Status of Construction

a. What is the current phase of the project?

- Planning    
  Design    
  Construction    
  N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 12. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs</b>		
Salary and Benefits	Florida Atlantic University will hire faculty members with expertise relevant to the proposed instrumentation and who align with the strategic focus of its research institutes.	2,436,000
Expense/Equipment/Travel/Supplies/Other	Florida Atlantic University proposes a one-time allocation for an animal MRI instrument (\$2.6M base model, \$915K PET insert, \$580K CryoProbe kit, and \$69K warranty) and another one-time allocation for an 800 MHz nuclear magnetic resonance (NMR) instrument.	4,164,000
Consultants/Contracted Services/Study		0
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>6,600,000</b>

### 13. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?



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Florida Atlantic has achieved a new designation as an R1 Very High Research Activity University. To expand capacity and prepare for expanded pre-clinical and clinical studies, the university is seeking one-time investments to acquire scientific instruments, hire faculty with experience relevant to the proposed instruments and individuals who can support the expanded research infrastructure of the university and ongoing clinical trials related to incurable neurological diseases.

**b. What activities and services will be provided to meet the intended purpose of these funds?**

Clinical studies include brain imaging to monitor changes based on disease status and treatment effectiveness, as well as developing convenient analytical methods (such as blood tests) that correlate to imaging data. Diagnostic tools can then track disease initiation and progression, as well as contribute to the development of therapeutics. These investments further advance FAU's growing capabilities to perform clinical studies of brain disorders and treatments.

**c. What direct services will be provided to citizens by the appropriation project?**

Utilizing the proposed instrumentation with trained staff and faculty will allow FAU to make advances in the study of curing neurological diseases that are currently incurable. The university is currently limited in its scope and ability to conduct research due to both a lack of people and the equipment, but if provided both, we will be equipped to continue conducting research that is promising for further understanding and one day possibly curing neurological diseases that are considered incurable today.

**d. Who is the target population served by this project? How many individuals are expected to be served?**

The potential impacts of this request are long-lasting and have the potential to transform the way healthcare providers treat and study incurable neurological diseases. Individuals who will be served include those suffering from incurable neurological diseases in the State of Florida and beyond, but there are also wider implications as the studies evolve and we learn more about how to effectively administer medication through the blood brain barrier.

**e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

The funding will allow for enhanced infrastructure that will enable FAU, its new faculty members, and its network of partners to bring meaningful therapies to market to accelerate the cure of incurable neurological diseases, including but not limited to Alzheimer's disease, Parkinson's disease, and glioblastoma. Advances in clinical trials will be meticulously tracked according to research standards.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

If Florida Atlantic University does not accomplish the plan as proposed, the state of Florida may recall funds associated with this request.

**14. Is this project related to mitigation, response, or recovery from a natural disaster?**

**a. If Yes, what phase best describes the project?**

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

**b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):**

**15. Has the entity applied for or received federal assistance for this project?**

- Yes, Applied
- Yes, Received



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- No
- No, but intends to apply

**a. If yes, provide the FEMA project worksheet ID#:**

**b. Provide the total project cost listed on the FEMA project worksheet:**

**16. Has the entity applied for or received state assistance for this project (other than this request)?**

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

**a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):**

**17. Requester Contact Information**

**a. First Name**  **Last Name**

**b. Organization**

**c. E-mail Address**

**d. Phone Number**  **Ext.**

**18. Recipient Contact Information**

**a. Organization**

**b. Municipality and County**

**c. Organization Type**

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify)



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d. First Name  Last Name

e. E-mail Address

f. Phone Number  Ext.

#### 19. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number

*The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.*